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Agenda item 123
Global health and foreign policy

Andorra, Argentina, Australia, Belarus, Bosnia and Herzegovina, Brazil, Burundi, Chile, Costa Rica, Dominican Republic, Egypt, Finland, France, Germany, Greece, Indonesia, Ireland, Israel, Japan, Kazakhstan, Lebanon, Luxembourg, Madagascar, Malawi, Mexico, Monaco, Mongolia, Montenegro, Mozambique, Norway, Portugal, Republic of Korea, Saint Vincent and the Grenadines, Senegal, Slovenia, Somalia, South Africa, Spain, Sudan, Switzerland, Thailand, the former Yugoslav Republic of Macedonia, Togo, United Kingdom of Great Britain and Northern Ireland and Zimbabwe: draft resolution

Global health and foreign policy

The General Assembly,

Recalling its resolution 63/33 of 26 November 2008, entitled "Global health and foreign policy",

Recalling also the outcomes of the major United Nations conferences and summits in the economic, social and related fields, especially those related to global health,

Recalling further that achieving the health-related Millennium Development Goals is essential to socio-economic development, concerned by the relatively slow progress in achieving them, and mindful that special consideration should be given to the situation in sub-Saharan Africa,

Noting the adoption on 24 May 2008 of World Health Assembly resolution 61.18,[1] which initiated the annual monitoring by the World Health Assembly of the achievement of the health-related Millennium Development Goals,

Recalling its resolutions 58/3 of 27 October 2003, 59/27 of 23 November 2004 and 60/35 of 30 November 2005, all entitled "Enhancing capacity-building in global public health", the resolutions of the World Health Assembly, in particular

[1] See *World Health Organization, Sixty-first World Health Assembly, Geneva, 19-24 May 2008, Resolutions and Decisions, Annexes* (WHA61/2008/REC/1).

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resolution 60.28 of 23 May 2007[2] and resolution 62.10 of 22 May 2009,[3] both entitled "Pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits", and the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property,[4]

Noting the contribution of the High-level Forum on Advancing Global Health in the Face of Crisis, which took place at United Nations Headquarters on 15 June 2009 and engaged multisectoral high representatives from around the world in the global health debate on protecting vulnerable populations, building resilient health systems and enhancing coherence towards multi-stakeholder strategic partnerships,

Welcoming the outcome of the annual ministerial review held by the Economic and Social Council in 2009, on "Implementing the internationally agreed goals and commitments in regard to global public health",[5]

Recognizing the leading role of the World Health Organization as the primary specialized agency for health, including its roles and functions with regard to health policy in accordance with its mandate,

Noting the role and contribution of the Foreign Policy and Global Health Initiative in promoting synergy between foreign policy and global health, as well as the contribution of the Oslo Ministerial Declaration entitled "Global health: a pressing foreign policy issue of our time"[6] to placing health as a foreign policy issue on the international agenda,

Noting also the outcome of the Thirty-fourth Summit of the Group of Eight held in Tōyako, Hokkaidō, Japan, from 7 to 9 July 2008, which highlighted the principles for action on global health to achieve all the health-related Millennium Development Goals,

Emphasizing that the United Nations system has an important responsibility to assist Governments in the follow-up to and full implementation of agreements and commitments reached at the major United Nations conferences and summits, especially those focusing on health-related areas,

Underscoring the fact that global health is also a long-term objective which is local, national, regional and international in scope and requires sustained attention, commitment and closer international cooperation beyond emergency,

Reaffirming the commitment to strengthening health systems that deliver equitable health outcomes as the basis for a comprehensive approach, which requires appropriate attention to, inter alia, health financing, the health workforce, the procurement and distribution of medicines and vaccines, infrastructure, information systems, service delivery and political will in leadership and governance,

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[2] Ibid., *Sixtieth World Health Assembly, Geneva, 14-23 May 2007, Resolutions and Decisions, Annexes* (WHA60/2007/REC/1).

[3] Ibid., *Sixty-second World Health Assembly, Geneva, 18-22 May 2009, Resolutions and Decisions, Annexes* (WHA62/2009/REC/1).

[4] Ibid., resolution 62.16.

[5] See *Official Records of the General Assembly, Sixty-fourth Session, Supplement No. 3* (A/64/3/Rev.1).

[6] A/63/591, annex.

Appreciating the contribution made by civil society, including non-governmental organizations and the private sector, on issues related to foreign policy and global health,

Welcoming the ongoing partnerships between a variety of stakeholders at the local, national, regional and global levels aimed at addressing the multifaceted determinants of global health and the commitments and initiatives to accelerate progress on the health-related Millennium Development Goals, including those announced at the high-level event on the Millennium Development Goals, held at United Nations Headquarters on 25 September 2008, and at the corresponding follow-up high-level event held on 23 September 2009,

Noting with concern that for millions of people throughout the world, the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, including, inter alia, access to medicines, still remains a distant goal and that, in many cases, especially for those living in poverty, this goal is becoming increasingly remote,

1. *Notes with appreciation* the report of the Secretary-General on global health and foreign policy[7] and the recommendations contained therein;

2. *Recognizes* the close relationship between foreign policy and global health and their interdependence, and in that regard also recognizes that global challenges require concerted and sustained efforts by the international community;

3. *Stresses* the importance of achieving the health-related Millennium Development Goals;

4. *Welcomes* the Ministerial Declaration[5] adopted during the annual ministerial review held by the Economic and Social Council in 2009 which focused on the theme "Implementing the internationally agreed goals and commitments in regard to global public health", and in that regard calls for enhanced coordination within the United Nations system;

I. Control of emerging infectious diseases and foreign policy

5. *Welcomes* the international coordinated actions in response to the recent influenza A (H1N1) pandemic as a good example of synergies between global health and foreign policy;

6. *Emphasizes* the need for further international cooperation to meet emerging, new and unforeseen threats and epidemics, such as the current influenza A (H1N1) virus pandemic, and H5N1 and other influenza viruses with pandemic potential, and acknowledges the growing health problem of antimicrobial resistance;

7. *Recognizes* the need for a fair, transparent, equitable and efficient framework for the sharing of H5N1 and other influenza viruses with human pandemic potential, and for the sharing of benefits, including access to and distribution of affordable vaccines, diagnostics and treatments, to those in need, especially in developing countries, in a timely manner;

8. *Acknowledges* with serious concern that current global influenza vaccine production capacity remains insufficient to meet anticipated need in pandemic

[7] A/64/365.

situations, particularly in developing countries, that some countries cannot develop, produce, afford or access needed vaccines and other benefits, and acknowledges also in this regard the interlinkage with production capacity of seasonal influenza vaccines and the ability to ensure their effective use;

9. *Calls for* strengthening surveillance and response capacity at the national, regional and international levels through the full implementation of the International Health Regulations;

10. *Stresses* the importance of finalizing any remaining elements of the Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits;[3]

11. *Acknowledges* that communication with the public must be improved in order to increase awareness of the steps in basic hygiene that citizens can and should take in order to lessen their risk of contracting and transmitting influenza;

II. Human resources for health and foreign policy

12. *Notes with concern* the lack of health workers, as well as their uneven distribution within countries and throughout the world, in particular the shortage in sub-Saharan Africa, which undermines the health systems of developing countries;

13. *Emphasizes* the need for countries to review policies, including recruitment policies and retention policies that exacerbate this problem;

14. *Underlines* the importance of national and international actions, including the development of health workforce plans, which are necessary to increase universal access to health services, including in remote and rural areas, taking into account the challenges facing developing countries in the retention of skilled health personnel, and in this regard, encourages the finalization of a World Health Organization code of practice on international recruitment of health personnel;

15. *Urges* Member States to affirm their commitment to the training of more health workers by promoting training in accredited institutions of a full spectrum of high-quality professionals, as well as community health workers, public health workers and para-professionals, in particular through international cooperation programmes including South-South cooperation, North-South cooperation and triangular cooperation;

III. Follow-up actions

16. *Urges* Member States to consider health issues in the formulation of foreign policy;

17. *Encourages* Member States, the United Nations system, academic institutions and networks to increase their capacity for the training of diplomats and health officials, in particular those from developing countries, on global health and foreign policy, by developing best practices and guidelines for training and open-source information, and educational and training resources for this purpose;

18. *Requests* the Secretary-General, in close collaboration with the Director-General of the World Health Organization, with the participation of relevant programmes, funds and specialized agencies of the United Nations system, and in

consultation with Member States, to submit a report to the General Assembly at its sixty-fifth session, under the agenda item entitled "Global health and foreign policy", which, inter alia:

(a) examines ways in which foreign and health policy coordination and coherence can be strengthened at the national, regional and international levels;

(b) identifies institutional linkages; and

(c) makes concrete recommendations, with a specific focus on making foreign policy contribute better to creating a global policy environment supportive of global health, as a contribution to the high-level plenary meeting of the General Assembly to be held in September 2010.

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Global health and foreign policy

Addendum

Add the following countries to the list of sponsors of the draft resolution:

Albania, Bahamas, Bulgaria, Croatia, Cyprus, El Salvador, Grenada, Hungary, Iceland, Jamaica, Liechtenstein, Lithuania, San Marino, Serbia, Suriname, Sweden, Trinidad and Tobago, Turkey and Ukraine

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